
CBE ID

0698

Title

30-Day Post-Hospital AMI Discharge Care Transition Composite Measure

Project

All-Cause Admissions and Readmissions

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Full Year 2013

Removal Date

Mon, 02/03/2014 - 19:00

Initial Endorsement

Sun, 01/16/2011 - 19:00

Steward

Centers for Medicare & Medicaid Services

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Composite Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

This measure scores a hospital on the incidence among its patients during the month following discharge from an inpatient stay having a primary diagnosis of heart failure for three types of events: readmissions, ED visits and evaluation and management (E&M) services.

These events are relatively common, measurable using readily available administrative data, and associated with effective coordination of care after discharge. The input for this score is the result of measures for each of these three events that are being submitted concurrently under the Patient Outcomes Measures Phase I project's call for measures (ED and E&M) or is already approved by NQF (readmissions). Each of these individual measures is a risk-adjusted,

standardized rate together with a percentile ranking. This composite measure is a weighted average of the deviations of the three risk-adjusted, standardized rates from the population mean for the measure across all patients in all hospitals. Again, the composite measure is accompanied by a percentile ranking to help with its interpretation.

1.7 Measure Type

Composite

1.8 Level of Analysis

Other

1.14 Numerator

The numerator is the weighted sum of the three deviations from their expected values for the individual measures comprising the component measure. The question of appropriate weights on the deviations is difficult and would probably lead to a wide variation in opinion. The weights of -4, -2, and 1 are selected to represent order of magnitude differences in seriousness of the three outcomes, which most would agree to (that is to say: readmission is more important than ED which is more important in a negative way than E & M service is in a positive way). The idea of not using weights was also considered, but this was noted to be itself a de facto weight scheme (with all weights the same), and as such, a weight scheme that was less appropriate than the one chosen.

1.15 Denominator

The composite measure is the weighted sum of three individual measures. Thus, the denominator is one.

1.20 Types of Data Sources

Documentation of original self-assessment, Electronic Health Records: Electronic Health Records, Management Data, Paper medical record/flow-sheet, Pharmacy data, Registry data

6.1.2 Current or Planned Use(s)

Public Reporting, Quality Improvement (Internal to the specific organization)

6.1.3 Current Use(s)

Public Reporting, Quality Improvement (Internal to the specific organization)

Exclusions

N/A

Planned Use

Public Reporting, Quality Improvement (Internal to the specific organization)

Risk Adjustment

No risk adjustment or risk stratification

Steward Organization

Centers for Medicare & Medicaid Services

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